

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | BA | 7C385 | |
| O.I.P.E. CLASSIFIER | | 48 | 6/23/00 |
| FORMALITY REVIEW | RS | 61730 | 8-28-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

..... Rejected N Non-elected
 Allowed I Interference
 (Through numeral)... Canceled A Appeal
 Restricted O Objected

| Claim | Date |
|----------|----------|
| Original | 11/28/01 |
| 1 | 11/28/01 |
| 2 | 11/28/01 |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Final Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

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